

Girls Youth Basketball Registration Form 2014

Mt. Vernon Parks & Recreation Youth Basketball
2nd + 3rd grade league and 4th + 5th grade league

Please fill out this form and return to the Parks & Rec office (at the Hedges building) by Friday (Oct. 31st)

Fees: \$35 per participant (\$20 second child). Parks and Recreation will be running the program with the support of Coach Sanders. Cash or Check only. **Check payable to: Mt. Vernon Parks & Recreation**

MANDATORY EVALUATION:

Nov 4th for 4th and 5th Grade 6:30-7:30pm in the Main Gym at MVHS
2nd and 3rd Grades will be announced

Parents who are willing to coach are encouraged to help out with the evaluations

Games will start first weekend of December (6th).

(Participant) Name _____ Grade: 2nd 3rd 4th 5th

Address _____ School _____

Phone _____ D.O.B. _____ Age _____

Email _____

Jersey/T-shirt size (circle one):

YS YM YL
(Youth Sizes)

S M L XL
(Adult sizes)

Will you please: Coach? yes no Assist Coach? yes no Coach Shirt Size: S M L XL 2XL

PARENT/GUARDIAN PERMISSION:

(Both parents must sign this permission form. If only one parent is available to sign, the parent signing must assume complete and absolute responsibility as set forth below)

We/I hereby grant permission for my child _____ to participate in the: *Youth Basketball League.*

We/I represent that my child is physically fit and suffers from no health issue which would prevent him/her from participating in this activity. We/I will assume all responsibility and obligation for my child in case of injury or accident sustained during participation in this program. We/I release and hold harmless the Mt. Vernon Parks & Recreation Board, Metropolitan School District of Mt. Vernon, employees of the Mt. Vernon Parks Department, and all other paid and volunteer personnel from any and all liability, loss, damage, injury which may result or occur during the course of this sports program. We/I give permission for the Mt. Vernon Park & Recreation Department to use individual photographs and team photographs as the department sees fit, including but not limited to, print and internet publication. We/I will work together with the Mt. Vernon Park & Recreation Department and all persons involved in this sports program to build a fine program for all of the youths involved.

Date: _____

Parent/Guardian Signature

Date: _____

Parent/Guardian Signature

Contact Information:

Father: Name _____ Home #: _____ Work #: _____ Cell #: _____

Mother: Name _____ Home #: _____ Work #: _____ Cell #: _____

Rec. # _____ Date Rec'd _____ By _____